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**REQUEST FORM FOR CONTINUED EXAMINATION (RCE)  
UNDER 37 CFR 1.114**

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**MAIL STOP RCE  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450**

**27299**

PATENT TRADEMARK OFFICE



I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Express Mail Label No. EV 520322842 US  
Date of Deposit: Wednesday, November 23, 2005

By:

Robert F. Gazdzinski  
Reg. No. 39,990

Dear Sir,

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of prior Application No. 10/074,705 filed on February 13, 2002, entitled **EMBEDDED-DRAM-DSP ARCHITECTURE**, having the same title, by inventor(s): Eric M. Dowling. Applicant requests that the file jacket and entire contents of prior Application No. 10/074,705 filed on February 13, 2002 be considered.

Enclosed are the following documents:

- (X) Amendment and Response to Final Office Action (Including Request for Continued Examination) (29 Pages).
- (X) Applicant hereby requests a ONE-MONTH extension of time in responding to the Patent Office communication mailed July 25, 2005.

The fee has been calculated as shown below:

11/28/2005 SSITHIB1 00000015 501423 10074705  
01 FC:1801 790.00 DA  
02 FC:1201 400.00 DA  
03 FC:1202 2550.00 DA

**CLAIMS AS FILED**

|  | CLAIMS<br>REMAINING<br>AFTER AMENDMENT |       | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE   | ADDITIONAL<br>FEE |
|--|--|-------|---------------------------------------|------------------|--|-------------------|
| Basic Filing Fee   |  |       |                                       |                  | \$790  | = \$ 790          |
| Total Claims   | 94                                     | MINUS | 43                                    | = 51 X           | \$ 50  | = \$2,550         |
| Independent Claims   | 16                                     | MINUS | 14                                    | = 2 X            | \$200  | = \$ 400          |
| If application has been amended to contain multiple dependent claim(s), then add |  |       |                                       |                  | \$360  | = \$0             |
| (Select only one)  |  |       |                                       | one month        | \$120  | = \$ 120          |
| Time Extension Fees:   |  |       |                                       | two months       | \$450  | = \$0             |
|  |  |       |                                       | three months     | \$1020   | = \$0             |
|  |  |       |                                       |                  | <b>TOTAL ADDITIONAL FEE<br/>FOR THIS APPLICATION</b> | <b>\$3,860.00</b> |

(X) The Commissioner is hereby authorized to charge any required fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 501423. A duplicate copy of this sheet is enclosed.

(X) Return prepaid postcard.

Address all future communications to:

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Date: 11/23/05

Signature: 

Robert F. Gazdzinski  
Registration No. 39,990  
Attorney of Record